



1771
#12 \$
PATENT *C. J. [unclear]*
4/15/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Karin Löffler et al. ✓

Examiner: Guarriello, John J. ✓

Serial No.: 09/719,326 ✓

Art Unit: 1771 ✓

Filed: February 19, 2002 ✓

Docket No.: D078 1110

For: FLEXIBLE MULTILAYER FLAT
MATERIAL WITH REINFORCED
COVER LAYER

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APR 14 2003

TC 1700

PETITION FOR EXTENSION OF RESPONSE TIME
SUBMISSION OF EXTENSION FEE
FOR THREE MONTH EXTENSION

Assistant Commissioner for Patents
Washington, D. C. 20231

Sir:

Applicants petition the Commissioner of Patents and Trademarks to extend the time for response to the Office Action dated October 4, 2002, for three months from January 4, 2003 to April 4, 2003.

Submitted herewith is a check for \$930.00 to cover the cost of the extension. The Commissioner is hereby authorized to charge any deficiency in the payment of the required fee(s) or credit any overpayment to Deposit Account No. 09-0528.

04/10/2003 YPOLITE1 00000042 09719326

01 FC:1253

930.00 OP

4/13/03
Date

Respectfully submitted,

[Signature]
Steven L. Schmid
Registration No. 39,358

WOMBLE CARLYLE SANDRIDGE & RICE

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Atlanta, Georgia 30357-0037

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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Box Fee Amendment, Washington, D.C. 20231 on

April 3, 2003

[Signature]
Cheryl West

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APR 08 2003
U.S. DEPARTMENT OF COMMERCE
PATENT OFFICE

U.S. DEPARTMENT OF COMMERCE
PATENT OFFICE

Box Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

In re application of: Löffler et al.

Docket No.: D078 1110

Serial No.: 09/719,326

Examiner: Guarriello, John J.

Filed: February 19, 2002

Art Unit: 1771

Confirmation No.: 7007

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Transmitted herewith for filing is an amendment in the above-identified application.

[X] No additional fee is required.

Claims, As Amended				
(1) Claims Remaining After Amendment	(2) Highest No. Previously Paid For	(3) Present Extra	(4) Rate	(5) Additional Fee
All Claims 25	- 26	= 0	X \$18.00/\$9.00	\$0
Independent 2 claims	- 3	= 0	X \$84.00/\$42.00	\$0
			Total Additional Fee This Amendment->	\$0

[] Please charge my deposit account no. 09-0528 in the amount of \$ _____. A duplicate copy of this sheet is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to account no. 09-0528.

[] A check in the amount of _____ is attached.

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April 3, 2003
Cheryl West